

To: The Florida Dept. of State  
Subject: 000164 116055

From: Ashley Smith

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Division of Corporations

http://le.state.fl.us/scripts/efilcovr.exe

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110430000714  
Phone : (850) 222-1173  
Fax Number : (850) 224-1640

000164.116055

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address:

abosi@urbanthier.com

**FLORIDA/FOREIGN LP/LLP  
RMA ASSET MANAGEMENT, LTD.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$1,000.00

**C. LEWIS**

**DEC 14 2009**

**EXAMINER**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF LIMITED PARTNERSHIP  
FOR  
FLORIDA LIMITED PARTNERSHIP  
OR  
LIMITED LIABILITY LIMITED PARTNERSHIP**

**FILED**  
2009 DEC 11 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. RMA Asset Management, Ltd.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)  
*Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.  
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.  
or LLLP.*

2. 200 South Orange Avenue, Suite 2025  
(Street address of initial designated office)

Orlando, Florida 32801

3. Urban Thier Federer & Jackson, P.A.  
(Name of Registered Agent for Service of Process)

4. 200 South Orange Avenue, Suite 2025  
(Florida street address for Registered Agent)

Orlando, Florida 32801

5. *I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

(Attached)  
Signature of Registered Agent

6. 200 South Orange Avenue, Suite 2025  
(Mailing address of initial designated office)

Orlando, Florida 32801

7. If limited partnership elects to be a limited liability limited partnership, check box ☐

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**ACCEPTANCE OF APPOINTMENT OF  
REGISTERED AGENT**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED REGISTERED AGENT SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.


1. The name of the limited liability company is RMA ASSET MANAGEMENT, LTD., a Florida limited liability company.
2. The name and address of the registered agent and its office is:

Urban Thier Federer & Jackson, P.A.

200 South Orange Avenue  
Suite 2025  
Orlando, FL 32801

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in the certificate, the undersigned hereby accepts the appointment as registered agent and agree to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and is familiar with and accepts the obligation of his position as registered agent.

Urban Thier Federer & Jackson, P.A.

By:   
Carl Christian Thier, as its President

Dated this 8 day of December, 2009.

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TALLAHASSEE, FLORIDA

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8. Name and business address of each general partner:

Name:

Business Address:

RMA Manager, Inc.

200 South Orange Avenue, Suite 2025

PO9000099797

Orlando, Florida 32801

9. Effective date, if other than the date of filing:

*(Effective date cannot be prior to nor more than 90 days after the date the document  
filed by the Florida Department of State.)*

Signed this 9th day of December, 2009

Signature of each general partner:

RMA Manager Inc.

Ashley PRESIDENT

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

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